Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date;	<u>09-03-2010</u>	Address:	5809 KELSO LN	
Case #:	<u>221'46299</u>		FT. WAYNE,	
County:	ALLEN		<u>4681</u> 8	
Type of Laboratory Seizure (check one) Operational Lab Chemical/Glassware/Equipment (only) Dumpsite (only)		Scizure Location (c Residence Outbuilding Vehicle	check all that apply) Hotel/Motel Open – No Structure Other:	
Items Found: Location (bedroom, kitchen, open air, etc) (check all that apply) □ Lithium/Ammonia Reaction(s): BATHROOM □ Red Phosphorous/Iodine Reaction(s): □ □ Flammable Solvents: BATHROOM □ Water Reactive Metal (Lithium): □ □ Anhydrous Ammonia: □ □ Mydrochlotic Acid Gas Generator(s): BATHROOM □ Corrosive Acid: BATHROOM □ Other (item and Iocation): BATHROOM/AMMONIA NITRATE				
Child under age 18 discovered (check one) Yes 2 (number present) No *If yes, fax report to Child Protective Services This report is to be faxed to the following agencies Fire Department: FT WAYNE FD		Investigative ☐ Ephodring ☐ Rotail/Me ☐ Other:AL cies that serve the lo	Investigative Information ☐ Ephedrine/Pseudoephedrine Tracking Log ☐ Retail/Merchant Tip ☑ Other: ALLEN SHERIFF cs that serve the location: Fax: E-MAHLED Fax: E-MAHLED	
	etion Service: ALLEN CO	Fax: E-MAILED		
For further information regarding this methamphetamine laboratory, contact Investigating Officer: ANDREW SMITH Phone 260-432-8661				

This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

This form is to be included with the case file, and a copy sent to the Claudestine Laboratory Team Leader for retention.